

|   |   |                      |             |              |   |  |                         |  |
|---|---|----------------------|-------------|--------------|---|--|-------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD   |   |                      |             |              | Application or Docket Number<br><i>1071589D</i> |  |                         |  |
| Effective October 1, 2003   |   |                      |             |              |   |  |                         |  |
| <b>CLAIMS AS FILED - PART I</b>   |   |                      |             |              |   |  |                         |  |
| (Column 1)  |   | (Column 2)           |             |              |   |  |                         |  |
| TOTAL CLAIMS  |   | <i>34</i>            |             |              |   |  |                         |  |
| FOR   |   | NUMBER FILED         |             | NUMBER EXTRA |   |  |                         |  |
| TOTAL CHARGEABLE CLAIMS   |   | <i>34</i> minus 20 = |             | <i>14</i>    |   |  |                         |  |
| INDEPENDENT CLAIMS  |   | <i>4</i> minus 3 =   |             | <i>1</i>     |   |  |                         |  |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>   |   |                      |             |              |   |  |                         |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2.   |   |                      |             |              |   |  |                         |  |
| <i>4.8.05</i> <b>CLAIMS AS AMENDED - PART II</b>  |   |                      |             |              |   |  |                         |  |
| (Column 1)  |   | (Column 2)           |             | (Column 3)   |   |  |                         |  |
| AMENDMENT A   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      |             |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR     |  | PRESENT<br>EXTRA        |  |
|   | Total                                     |                      | * <i>34</i> |              | Minus   |  | ** <i>34</i> = <i>1</i> |  |
|   | Independent                               |                      | * <i>4</i>  |              | Minus   |  | *** <i>4</i> = <i>1</i> |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>   |   |                      |             |              |   |  |                         |  |
| AMENDMENT B   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      |             |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR     |  | PRESENT<br>EXTRA        |  |
|   | Total                                     |                      | * <i></i>   |              | Minus   |  | ** <i></i> = <i></i>    |  |
|   | Independent                               |                      | * <i></i>   |              | Minus   |  | *** <i></i> = <i></i>   |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>   |   |                      |             |              |   |  |                         |  |
| AMENDMENT C   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      |             |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR     |  | PRESENT<br>EXTRA        |  |
|   | Total                                     |                      | * <i></i>   |              | Minus   |  | ** <i></i> = <i></i>    |  |
|   | Independent                               |                      | * <i></i>   |              | Minus   |  | *** <i></i> = <i></i>   |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>   |   |                      |             |              |   |  |                         |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |   |                      |             |              |   |  |                         |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."                                       |   |                      |             |              |   |  |                         |  |
| *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  |   |                      |             |              |   |  |                         |  |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                      |             |              |   |  |                         |  |